Program Enrollment Name

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Service Description	Outpatient	Parole Aftercare	Intensive Outpatient	IYTP	Halfway Housing	Detox	Residential	Pre- Treatment	GAIN-I Assessment	Medicaid	Private Pay	Recovery Support Services
(90785) Interactive Complexity										Х	Х	
(90791) Psychiatric Diagnostic Evaluation										Х	Х	
(90792) Psychiatric Diagnostic Evaluation with Medical Services										X	X	
(90792/GT) Telehealth Psychiatric Diagnostic Evaluation with Medical Services										Х	X	
(90832) Psychotherapy, 30 minutes										X	X	
(90832/GT) Telehealth Psychotherapy, 30 minutes										Х	X	
(90833) Psychotherapy, 30 minutes with evaluation and management service										Х	X	
(90833/GT) Telehealth Psychotherapy, 30 minutes with evaluation and management service										X	X	
(90834) Psychotherapy, 45 minutes										X	X	
(90836) Psychotherapy, 45 minutes with evaluation and management service										X	X	
(90837) Psychotherapy, 40 minutes with evaluation and management service	_									X	X	
(90846) Family Psychotherapy, without patient										X	X	
(90847) Family Psychotherapy, without patient	_									X	X	
(90853) Group Psychotherapy										X	X	
(H0001) Individual Assessment - Substance Abuse										X	X	
(H0001) Individual Assessment - Substance Abuse (H0003) Drug/Alcohol Testing	_									X	X	
, , ,										X	X	
(H0004) Individual Counseling - Substance Abuse												
(H0004/76) Individual Counseling - Second Service, Same Day										X	X	
(H0005) Group Counseling - Substance Abuse	_									X	X	
(H0005/76) Group Counseling - Second Service, Same Day	_									Х	Х	
(H0006) Case Management - Substance Abuse	_									Х	Х	
(H0006/76) Case Management - Second Service, Same Day										Х	Х	
(H0023) Telephonic Case Management										Х	Х	
(H0031) BH Service Coordination Plan Assessment and Development										Х	Х	
(H0032) Individualized Treatment Plan										Х	Х	
(H0038) Peer Support by certified Peer Support Specialist										Х	Х	
(H0046) Family Support by Family Support Specialist										Х	Х	
(H2011) Community Crisis Intervention										Х	Х	
(H2014) Skills Training and Development										Х	Х	
(H2015) Community Transition Support Services										Х	X	
(H2017/76) Community Based Rehab Services										Х	X	
(T1013) Sign Language or Oral Interpretation Services										Х	X	
(T1017) Case Management - Behavioral Health										Х	Х	
Adolescent Residential							Х				Х	
Adolescent Safe & Sober Housing	X		X		Х	Х					Х	Х
Adolescent Transitional Housing	Х		X						Х		Х	Х
Adult Detox						Х					Х	
Adult Halfway House					Х						Х	
Adult Residential							Х				Χ	
Adult Safe & Sober Housing	Х	Х	Χ					Х	Х		Х	Х
Adult Transitional Housing	Х	Х	Х		Х						Х	Х
Alcohol or Drug Assessment								Х	Х		Х	
Case Management (Basic and Intensive)	Х	Х	Х		Х	Х		Х	Х		Х	Х
Case Management (PWWC)	Х	Х	Х		Х	Х		Х	Х		Х	Х
Child Care	Х	Х	Х		Х	Х		Х	Х		Х	Х
Common Assessment	х	Х							х		Х	
Drug/Alcohol Testing	х	Х	Х		Х	Х		Х	х		Х	х
Education (Medicaid Supplemental)	X	Х	Х					Х			Х	
Extended Therapy Session										Х		
Intensive Outpatient	1	1	Х					1		- 	Х	

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Intensive Outpatient (Education)			Х								Х	
Intensive Outpatient (family without client present)			Х								Х	
Intensive Outpatient (Individual with Family Members)			Х								Х	
Intensive Outpatient (Individual)			Х								Х	
Interpreter Services	Х	Х	Х		Х	Х	Х	х	Х		Х	Х
IYTP 3 Month Follow-up Interview				Х								
IYTP 6 Month Follow-up Interview				Х								
IYTP Case Management				Х								
IYTP Client/Family Contact Preparation				X								
IYTP Drug Testing				X								
IYTP Family Sessions (with client present)				X								
IYTP Family Sessions (without client present)				X								
IYTP GAIN-I Assessment				X								
IYTP GAIN-M90 Assessment				X								
IYTP GPRA Discharge Interview				X								
IYTP GPRA Discharge Interview IYTP GPRA Intake Interview												
IYTP GPRA Intake Interview IYTP GPRA Interview				X X								
IYTP Group Session				Х								
IYTP Individual Session				Х								
IYTP Ineligible Services				Х								
IYTP Screening by Clinician				Х								
IYTP Screening by Support Staff				Х								
IYTP Transportation				Х								
IYTP Transportation of Client				Х								
IYTP Transportation Pick Up				Х								
IYTP Treatment Program Services				Х								
Life Skills	Х	Х	Х		Х	Х		Х	Х		Χ	Х
Life Skills (Group)	Х	Х	Х		Χ	Х		Х	Х		Х	Х
Life Skills (Individual)	Х	Х	Х		Х	Х		Х	Х		Х	Х
Life Skills (Medicaid Supplemental)	Х	Х	Х		Х	Х		Х	Х		Х	Х
Life Skills Group (Medicaid Supplemental)	Х	Х	Х		Χ	Х		Х	Х		Х	Х
Life Skills Group w/o client (Medicaid Supplemental)	Х	Х	Х		Х	Х		х	Х		Х	Х
Life Skills Individual w/o client (Medicaid Supplemental)	Х	Х	Х		Х	Х		х	Х		Х	Х
Life Skills-Client not present (Group)	х	Х	Х		Х	Х		Х	х		Х	Х
Life Skills-Client not present (Individual)	X	Х	Х		X	Х		X	X		Х	Х
Lodging	X	X	X						X		Х	X
Medical Needs Benefit	X	X	X		Х	Х	Х		X		X	X
OP and IOP (Group)	X	X	X		^	^	^	Х	^		X	^
Outpatient	X	X	^					X			X	
Outpatient (Education)	X	X						X			X	
	X	X						X			X	
Outpatient (family without client present)											X	
Outpatient (Individual with Family Members)	X	X						X				
Outpatient (Individual)	X	X						X			X	
Parolee Aftercare	Х	Х									Х	
Pre-Treatment Services								Х			Х	
Pre-Treatment Services (Education)								X			Х	
Pre-Treatment Services (Individual)								Χ			Х	
Staffing (Planned Facilitation)	Х	Х	Х		X	Х	Х	Х			Х	ļ
Transportation	Х	Х	Х		Х	Х	Х	Х	Х		Х	Х
Transportation Flat Fee	Х	Х	Χ		Х	Х	Х	Χ	Х		Х	X
Transportation of Child	Х	Х	Х		Х	Х	Х	Х	Х		Х	Х
Transportation of Child Per Mile	Х	Х	Х		Х	Х	Х	Х	Х		Х	Х
Transportation of Child Pick Up	Х	Х	Х		Х	Х	Х	Х	Х		Х	Х

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Transportation of Client	Х	Х	Х		Х	Х	Χ	Х	Х		Х	Х
Transportation pick up	Х	Х	Х		Χ	Х	Х	Х	Х		Χ	Х
Travel for Professionals (1 unit = 1 Mile)								Х	Х		Х	